

# Work Order ID 96179

January-23-13 12:58:02 PM

**\*96179\***

Page 1

Item ID: D4728-043  
Revision ID:  
Item Name: LH Cabin Speaker #2

Accept

**\*N900040100\***

Setup Start **\*NS1\***  
Stop **\*NS2\***

Start Date: 1/16/13 Start Qty: 2.00  
Required Date: 2/08/13 Req'd Qty: 2.00

Cust Item ID:  
Customer:

Reference:

Approvals: Process Plan:                      Date: 13-01-24 Tooling:                      Date:                       
QC:                      Date:                      SPC (Y/N):                      Date:                     

Run Start **\*NR1\***  
Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D4728	A

110 0.00

**\*110\***

Outsource8  
Outsource process- Eagle

Memo  
Issue P/O to Eagle : PO80444  
Manufacture as per dwg  
Certificate of conformity required

120 Receive & Inspect for Damage & Mat'l Certs 0.00

**\*120\***

Packaging  
Packaging Memo  
Inspect and check certificate of conformity 0.00

130 QC4- 100% Inspect kits for completeness 0.00

**\*130\***

QC  
Quality Control Memo 0.00

DAS  
27  
9-89

13-9-16

*mls*

*13/1/12*

*Q*

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 96179

\*96179\*

Page 2

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Item ID: D4728-043 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: LH Cabin Speaker #2  
 Start Date: 1/16/13 Start Qty: 2.00 \*2\* Cust Item ID:  
 Required Date: 2/08/13 Req'd Qty: 2.00 \*2\* Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140	Identify as per dwg & Stock Location <i>81/22</i>	0.00							<i>D4</i>
*140*									
Packaging	Memo	0.00				<i>2x</i>			
Packaging									<i>13-9-16.</i>
150	QC21- Final Inspection - Work Order Release	0.00							
*150*									
QC	Memo	0.00							<i>MCS 13-09-17</i>
Quality Control									<i>pl 13-09-16</i>

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
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<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
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<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
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<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
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		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Picklist Print

Page 1

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Work Order ID: 96179

Parent Item: D4728-043

Start Date: 1/16/13

Required Date: 2/08/13

Parent Item Name: LH Cabin Speaker #2

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP REV:A 12.11.09 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D4728-043P LH Cabin Speaker #2		Purchased	No				Each	0.0000		2		1/23/13	

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

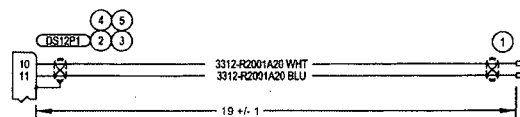
DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY			
<b>Landing Gear</b>  <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b>  <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other

LIST OF MATERIALS					
QTY PER	ITEM	PART NUMBER	DESCRIPTION	SUPPLIER	
	2	1	640911-1	TERMINAL	TYCO ELECTRONICS
	1	2	M24308/4-2Z	CONNECTOR	
A/R (2)		3	M39029/64-369	CONTACTS	
	1	4	M85049/48-2-2F	BACKSHELL	
	1	5	M24308/26-1F	JACKSCREW KIT	



**D4728-042 RH CABIN SPEAKER #1**

**NOTES:**

- ALL NEW UNSHIELDED WIRE USE M22759/41-xx-8 TYPE WIRE UNLESS OTHERWISE SPECIFIED (M22759/41-XX-X IS NOT INTENDED TO BE USED IN SOLDER APPLICATIONS. SOLDERABILITY CAN BE ACHIEVED WITH THE PROPER SOLDER. USE CRIMP SPLICES FOR REPAIR).
- ALL NEW TWISTED SHIELDED CABLE USE M27500-xxTGxT14 TYPE CABLE UNLESS OTHERWISE SPECIFIED.
- ALL WIRES 20 AWG UNLESS OTHERWISE SPECIFIED.
- IDENTIFY CODE ALL WIRES AND CABLES IN ACCORDANCE WITH 39-A-AWDP-00-X WIRING DATA PUBLICATION.
- KEEP ALL JUMPERS, LOGIC STRAP, POWER, CHASSIS AND SIGNAL GROUND WIRES AS SHORT AS POSSIBLE.
- ALL TERMINALS TO BE INSTALLED IN ACCORDANCE WITH 39-A-AWDP-00-X WIRING DATA PUBLICATION.
- ALL ELECTRICAL GROUNDING AND BONDING TO BE INSTALLED IN ACCORDANCE WITH 39-A-AWDP-00-X WIRING DATA PUBLICATION.
- ALL CONNECTORS TO BE INSTALLED IN ACCORDANCE WITH 39-A-AWDP-00-X WIRING DATA PUBLICATION.
- ENSURE ALL UNUSED CONNECTOR CONTACTS ARE FILLED WITH SPARE PINS/sockets OR PLASTIC GROMMET SEALING PLUGS.
- A DOT (•) BEFORE A CONNECTOR CONTACT LETTER DENOTES LOWER CASE.
- UNITS: INCHES UNLESS OTHERWISE NOTED.
- IDENTIFY CONNECTORS WITH SHRINK SLEEVE LABELS.

DESIGN	D4728	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	D4728		
CHECKED	KB	DRAWING NO.	REV. A
MFG. APPR.	CL	D4728	SHEET 2 OF 15
APPROVED	CL	TITLE	SCALE
DE APPR.	CL	UTILITY INTERIOR WIRING HARNESS	NTS
DATE	12.09.26	COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

RELEASED  
2012-11-05

96129  
PLB 01-24

# Eagle Copters Maintenance Ltd

823 McTavish Rd, NE  
Calgary, Alberta T2E 7G9  
Canada

## Packing Slip

September 12, 2013

Telephone: (403) 250-7370

Fax: (403) 250-7110

Shipment number: SH#13-002810

Customer PO number: PO20444

Ship To: Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Canada

Phone: (613)632-5200

Ship Via: FED EX

Carrier Terms:

Waybill: 796671258543

Customer PO number: PO20444

Item	Part Number	Part Description	Current Location	Qty	UOM	Serial Number	Lot Number
1	D4728-041P	LH CABIN SPEAKER #1	Shipping Area	1	Each		LT-13-013150.1
Type of sale: Outright							
		Sales Order Number: SO13-01247.001			Eagle PO Number:		
		PI Attn: Michael Gregoire					
2	D4728-041P	LH CABIN SPEAKER #1	Shipping Area	1	Each		LT-13-013171.1
Type of sale: Outright							
		Sales Order Number: SO13-01247.002			Eagle PO Number:		
		PI Attn: Michael Gregoire					
3	D4728-042P	RH CABIN SPEAKER #1	Shipping Area	1	Each		LT-13-013151.1
Type of sale: Outright							
		Sales Order Number: SO13-01247.003			Eagle PO Number:		
		PI Attn: Michael Gregoire					
4	D4728-042P	RH CABIN SPEAKER #1	Shipping Area	1	Each		LT-13-013174.1
Type of sale: Outright							
		Sales Order Number: SO13-01247.004			Eagle PO Number:		
		PI Attn: Michael Gregoire					
5	D4728-043P	LH CABIN SPEAKER #2	Shipping Area	1	Each		LT-13-013152.1
Type of sale: Outright							
		Sales Order Number: SO13-01247.005			Eagle PO Number:		
		PI Attn: Michael Gregoire					
6	D4728-043P	LH CABIN SPEAKER #2	Shipping Area	1	Each		LT-13-013175.1
Type of sale: Outright							
		Sales Order Number: SO13-01247.006			Eagle PO Number:		
		PI Attn: Michael Gregoire					

>> denotes that the Packing Slip line item has already been printed.



Work Order Number: 50442

Manufacture Dart Parts

*This Work Report forms part of this aircraft's permanent technical records - DO NOT DESTROY.*

Item: 3 LH CABIN SPEAKER #2

**Squawk: 3.1**Discrepancy:

Manufacture as per Drawing  
D4728-043 Rev A.  
Certificate of Conformity  
required. B96179

Resolution:

Manufactured IAW Drawing  
D4728-043 Rev B and  
BHT-ELEC-SPM. Tested  
serviceable. Maintenance  
release issued.

**3.1** Work Done By: Eric Olberg

*The maintenance described above has been performed in accordance with the applicable standards of airworthiness.*  
**AMO 6-81** Signature: Ljubomir Jovicic on 9/4/2013

Parts:

Part Number	Description	Serial Number	Lot Number	Condition	Qty
640911-1	SPADE SOCKET .205 22-18AWG		LT-09-009742	New	15
M24308/26-1F	FEMALE SCREW JACK		LT-13-010311.1	New	6
M24308/26-1F	FEMALE SCREW JACK		LT-13-010311	New	1

\*\*\*\*\* Original Maintenance Releases and Independent Control Inspection details are stored electronically at \*\*\*\*\*  
\*\*\*\*\* Eagle Copters Maintenance Ltd. in Calgary Alberta in the Corridor Software \*\*\*\*\*

Work Order Number: 50442

Manufacture Dart Parts

*This Work Report forms part of this aircraft's permanent technical records - DO NOT DESTROY.*

Item: 18 LH CABIN SPEAKER #2

**Squawk: 18.1**

Discrepancy:

Manufacture as per Drawing  
D4728-043 Rev A.  
Certificate of Conformity  
required. B96179

Resolution:

Manufactured IAW Drawing  
D4728-043 Rev B and  
BHT-ELEC-SPM. Tested  
serviceable. Maintenance  
release issued.

**18.1** Work Done By: Eric Olberg

*The maintenance described above has been performed in accordance with the applicable standards of airworthiness.*

**AMO 6-81** Signature: Ljubomir Jovicic on 9/4/2013

\*\*\*\*\* Original Maintenance Releases and Independent Control Inspection details are stored electronically at \*\*\*\*\*  
\*\*\*\*\* Eagle Copters Maintenance Ltd. in Calgary Alberta in the Corridor Software \*\*\*\*\*

**Eagle Copters Maintenance Ltd**  
823 McTavish Road, NE Calgary, Alberta T2E 7G9  
TCCAAMO Approval No. 6-81  
**Lot No: LT-13-013175.1**



**Bin No: STORES**  
**RECEIVED: 09/08/2013 (**  
**Part No: D4728-043P**  
Description: LH CABIN SPEAKER #2  
SERIAL #:  
Condition: New  
Cure Date:  
Manufacturer: Dart Aerospace (Manufacturer)  
Model No:

	Cycles	Hours
Total Time:	_____	_____
TSO:	_____	_____
Time Remaining :	_____	_____

Details of work performed/reason for removal

**Receiving Inspection**

Additional work to be performed upon installation

**Eagle Copters Maintenance Ltd**  
823 McTavish Road, NE Calgary, Alberta T2E 7G9  
TCCAAMO Approval No. 6-81  
**Lot No: LT-13-013182.1**



**Bin No: STORES**  
**RECEIVED: 09/08/2013 (**  
**Part No: D4728-043P**  
Description: LH CABIN SPEAKER #2  
SERIAL #:  
Condition: New  
Cure Date:  
Manufacturer: Dart Aerospace (Manufacturer)  
Model No:

	Cycles	Hours
Total Time:	_____	_____
TSO:	_____	_____
Time Remaining :	_____	_____

Details of work performed/reason for removal

**Receiving Inspection**

Additional work to be performed upon installation

September 11, 2013

Inspector

LIC No./Stamp

